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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

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SECRETARY OF THE SENATE PUBLIC RECORDS

14 JAN 28 PM 2: 37

	Tor Air Addionized Committee			Office Use Only	
NAME OF COMMITTEE (in ful	TYPE OR PRINT 1	Example: If typing over the lines.	type 12FE4M5		
FRIENDS OF SE	NATOR BOB SMITI	1		1	
<u>tl </u>	<u> </u>				
ADDRESS (number and s	treet) PO BOX 21			11111	
Check if differen	ent Lititi				
than previously reported. (ACC			L. NH C	03054	
2. FEC IDENTIFICAT	ION NUMBER ▼	CITY	STATE A	ZIP CODE A	
C C00552968		3. IS THIS NEW REPORT (N)	OR AMENDI	STATE ▼ DISTRICT ED	
4. TYPE OF REPO	RT (Choose One)	10 Day BBE Florida Descri	A for the	<u> </u>	
(a) Quarterly Repo	rts:	12-Day PRE -Election Repor	i for the:		
April 15 Qu	earterly Report (Q1)	Primary (12P)	General (12	2G) U Runoff (12R)	
		Convention (1)	2C) 🔲 Special (12	?S)	
July 15 Qu	arterly Report (Q2)	[M] /	<u> </u>		
October 15	Quarterly Report (Q3)	Election on		in the State of	
January 31	Year-End Report (YE) (c)	30-Day POST -Election Repo	ort for the:	4	
		General (30G)	Runoff (30)	R) Special (30S)	
Touris et la c	(TED)		`	y Ej opediai (000)	
iermination	Report (TER)	Election on		in the State of	
5. Covering Period	M'M / D'D / Y	2013 through	12 / 31 /	Y Y Y Y Y Y 2013	
I certify that I have exam	nined this Report and to the	best of my knowledge and be	elief it is true, correct and	complete.	
Type or Print Name of T	reasurer SCOTT B MACKE	NZIE			
Signature of Treasurer	SCOTT B MACKENZIG	ONO.	Date O.	1 22 1 22 14	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.					
Office				***************************************	
Use Only				FEC FORM 3 (Revised 02/2003)	